



RCE &
RFW



S&H Form: PTO/SB/30 (09/07)

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

(INCLUDING FILING FEE AND/OR PETITION FOR
EXTENSION OF TIME FEE)

*Subsection (b) of 35 U.S.C. §132, effective May 29, 2000
provides for continued examination of a utility or plant application
filed on or after June 8, 1995.
See The American Inventors Protection Act of 1999 (AIPA)*

| | | | |
|--|--|---|-------------------|
| To: Commissioner for Patents Box RCE PO Box 1450 Alexandria, VA 22313-1450 | | Attorney Docket No.: 1876.1002C (Formerly 1082.1035C) | |
| First Named Inventor | Osamu TOYODA et al. | | |
| Application No. | 10/810,661 | Group Art Unit | 1756 |
| Filing Date | March 29, 2004 | Examiner | MCPHERSON, JOHN A |
| CPA Filing Date | | Confirmation No | 1129 |
| Title of Invention | PLASMA DISPLAY PANEL AND METHOD FOR FABRICATING THE SAME | | |
| This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. | | | |
| 1. Submission required under 37 C.F.R. §1.114 (Box a or b must be completed) | | | |
| a. <input type="checkbox"/> Previously submitted i. <input type="checkbox"/> Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on ____ (Any unentered amendment(s) referred to above will be entered). ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on ____ iii. <input type="checkbox"/> Other b. <input checked="" type="checkbox"/> Enclosed i. <input checked="" type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (IDS) iv. <input type="checkbox"/> Other | | | |
| 2. Miscellaneous | | | |
| a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 C.F.R. §103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required). b. <input type="checkbox"/> Other | | | |

| | | | | | | |
|---|---|------------------------------------|--------------|------------------|------------------|------------------|
| | | | | BASIC FEE | | \$ 810.00 |
| Since an Official Action set an <u>original</u> due date of __, petition is hereby made for an extension of time to cover the date this RCE is filed, for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$460)); (3 months (\$1,050)); (4 months (\$1,640)); (5 months (\$2,230)): | | | | | | |
| Claims As Amended | Claims Remaining After Amendment | Highest Number Previously Paid For | Number Extra | Rate | | |
| Total Claims | | - 20 = | 0 | X \$ 50.00 | = | \$ 0.00 |
| Independent Claims | | - 3 = | 0 | X \$ 210.00 | = | \$ 0.00 |
| Suspension Fee (\$130.00) | | | | | | |
| Total of above Calculations = | | | | | | \$ 810.00 |
| Reduction by 50% for filing by small entity (Note 37 C.F.R. 1.9, 1.27, 1.28). | | | | | | |
| TOTAL FEES DUE = | | | | | | \$ 810.00 |
| 4. <input type="checkbox"/> Small entity status: a. <input type="checkbox"/> Verified Statement Claiming Small Entity Status. b. <input type="checkbox"/> A Verified Statement Claiming Small Entity Status was previously filed and such status is still proper and desired. c. <input type="checkbox"/> is no longer claimed. 5. <input type="checkbox"/> Other: | | | | | | |
| 6. METHOD OF PAYMENT | | | | | | |
| <input checked="" type="checkbox"/> A check in the amount of \$ \$810.00 is enclosed. <input type="checkbox"/> Charge "TOTAL FEES DUE" to Deposit Account No. 19-3935. (A duplicate copy of this form is enclosed.) | | | | | | |
| 7. GENERAL AUTHORIZATION | | | | | | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit any overpayment or charge any additional fees under 37 C.F.R. 1.16 (filing fees) or 37 C.F.R. 1.17 (processing fees) during the prosecution of this application and of any related application(s) claiming benefit hereof pursuant to 35 U.S.C. §120 to maintain pendency hereof and of any such related application to: Deposit Account No. 19-3935. | | | | | | |
| 8. CORRESPONDENCE ADDRESS | | | | | | |
| STAAS & HALSEY LLP  21171 <small>PATENT TRADEMARK OFFICE</small> | | | | | | |
| 9. SIGNATURE OF ATTORNEY OR AGENT REQUIRED | | | | | | |
| NAME | Matthew H. Polson | | | REGISTRATION NO. | 58,841 | |
| SIGNATURE |  | | | DATE | October 11, 2007 | |